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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 10/160,345 05/31/2002 PAT 6,722,767
which is a CIP of PCT/EP00/12116 12/01/2000

** FOREIGN APPLICATIONS *****

GERMANY DE 199 58 436.2 12/03/1999

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/29/2004

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	Examiner's Signature 	Initials	14	20	3

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TITLE

Method for determining vision defects and for collecting data for correcting vision defects of the eye by interaction of a patient with an examiner and apparatus therefor

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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